

Billing Code: 5001-06

DEPARTMENT OF DEFENSE

Office of the Secretary

[Docket ID: DoD-2012-HA-0165]

Proposed Collection; Comment Request

AGENCY: Office of the Assistant Secretary of Defense for Health Affairs, DoD.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, the Office of

the Assistant Secretary of Defense for Health Affairs announces a proposed public

information collection and seeks public comment on the provisions thereof. Comments

are invited on: (a) whether the proposed collection of information is necessary for the

proper performance of the functions of the agency, including whether the information

shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the

proposed information collection; (c) ways to enhance the quality, utility, and clarity of

the information to be collected; and (d) ways to minimize the burden of the information

collection on respondents, including through the use of automated collection techniques

or other forms of information technology.

DATES: Consideration will be given to all comments received by [insert date 60 days

from publication in the Federal Register].

ADDRESSES: You may submit comments, identified by docket number and title, by

any of the following methods:

Federal eRulemaking Portal: http://www.regulations.gov. Follow the instructions

for submitting comments.

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Mail: ODCMO, Directorate for Oversight and Compliance, 4800 Mark Center
Drive, Attn: Mailbox 24, Alexandria, VA 22350-1700.

Instructions: All submissions received must include the agency name, docket number and title for this Federal Register document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the Internet at http://www.regulations.gov as they are received without change, including any personal identifiers or contact information.

Any associated form(s) for this collection may be located within this same electronic docket and downloaded for review/testing. Follow the instructions at http://www.regulations.gov for submitting comments. Please submit comments on any given form identified by docket number, form number, and title.

FOR FURTHER INFORMATION CONTACT: To request more information on this proposed information collection or to obtain a copy of the proposal and associated collection instruments, please write to the Office of the Assistant Secretary of Defense for Health Affairs (OASD), Defense Health Agency, Tricare Dental Care Section, ATTN: COL James Honey, 7700 Arlington Blvd., 3M453, Falls Church, VA 22042, or call TRICARE Operations Division, at 703–681–8862.

SUPPLEMENTARY INFORMATION:

TITLE; ASSOCIATED FORM; AND OMB NUMBER: Department of Defense Active Duty/Reserve Forces Dental Examination; DD Form 2813; OMB Number 0720–0022.

NEEDS AND USES: The information collection requirement is necessary to obtain and record the dental health status of members of the Armed Forces. This form is the means for civilian dentists to record the results of their findings and provide the information to the member's military organization. The military organizations are required by Department of Defense policy to track the dental status of its members.

AFFECTED PUBLIC: Business or other for profit; Not-for-profit institutions

ANNUAL BURDEN HOURS: 37,500

NUMBER OF RESPONDENTS: 150,000

RESPONSES PER RESPONDENT: 5

ANNUAL RESPONSES: 750,000

AVERAGE BURDEN PER RESPONSE: 3 minutes

FREQUENCY: Annually

Respondents are medical professionals who provide dental services. Members of the Armed Forces of the United States are the recipients of the dental examination. The Armed Forces Reserve component members must maintain their dental health at a predetermined level so problems do not occur when they are deployed to a military operation. Reserve component members usually receive their dental care from civilian dentists; therefore it would be civilian dentists who would complete the form. Following a routine dental examination, the dentist would review the categories listed on the form and circle the number corresponding to the condition that best describes the dental health of the patient. If dental problems can be identified, they are indicated on the form. Once the form is complete and the dentist signs it, the members take the form back to the

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organization to which they belong. The information on the form is logged into a database.

The form is kept in the health record until no longer needed and then it is destroyed.

Dated: April 15, 2016.

Aaron Siegel,

Alternate OSD Federal Register

Liaison Officer, Department of Defense.

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